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JCS912 U.S. PTO  
05/10/01JCS912 U.S. PTO  
05/10/01  
09/852029

**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. N9450.0015/P015

First Inventor Masaya Kojima

Title CAPILLARY ARRAY ELECTROPHORESIS, etc.

Express Mail Label No.

**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents.

1.  Fee Transmittal Form (e.g., PTO/SB/17)  
*(Submit an original, and a duplicate for fee processing)*
2.  Applicant claims small entity status.  
See 37 CFR 1.27.
3.  Specification [Total Pages 57]
- (preferred arrangement set forth below)
  - Descriptive title of the invention
  - Cross Reference to Related Applications
  - Statement Regarding Fed Sponsored R & D
  - Reference to sequence listing, a table, or a computer program listing appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
4.  Drawing(s) (35 U.S.C. 113) [Total Sheets 14]
5. Oath or Declaration [Total Pages ]
- a.  Newly executed (original or copy)
- b.  Copy from a prior application (37 CFR 1.63(d))  
*(for continuation/divisional with Box 18 completed)*
  - i.  **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6.  Application Data Sheet See 37 CFR 1.76

**ADDRESS TO:** Box Patent Application  
Commissioner for Patents  
Washington, DC 20231

7.  CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission  
*(if applicable, all necessary)*
  - a.  Computer Readable Form (CRF)
  - b. Specification Sequence Listing on:
    - i.  CD-ROM or CD-R (2 copies); or ii.  paper
  - c.  Statements verifying identity of above copies

**ACCOMPANYING APPLICATIONS PARTS**

9.  Assignment Papers (cover sheet & document(s))
10.  37 CFR 3.73(b) Statement  Power of Attorney  
*(when there is an assignee)*
11.  English Translation Document (if applicable)
12.  Information Disclosure Statement (IDS)/PTO-1449  Copies of IDS Citations
13.  Preliminary Amendment
14.  Return Receipt Postcard (MPEP 503)  
*(Should be specifically itemized)*
15.  Certified Copy of Priority Document(s)  
*(if foreign priority is claimed)*
16.  Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i)  
Applicant must attach form PTO/SB/35 or its equivalent.
17.  Other: \_\_\_\_\_

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76

 Continuation     Divisional     Continuation-in-part (CIP) of prior application No.: \_\_\_\_\_

Prior application information: Examiner \_\_\_\_\_

Group / Art Unit: \_\_\_\_\_

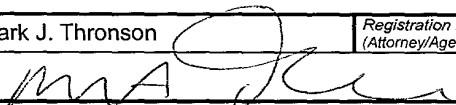
For CONTINUATION or DIVISIONAL APPS only. The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**19. CORRESPONDENCE ADDRESS**

<input type="checkbox"/> Customer Number or Bar Code Label				or <input checked="" type="checkbox"/> Correspondence address below
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Name	DICKSTEIN SHAPIRO MORIN & OSHINSKY LLP Mark J. Thronson			
Address	2101 L Street NW			
City	Washington	State	DC	Zip Code
Country	US	Telephone	(202) 785-9700	Fax (202) 887-0689
Name (Print/Type)	Mark J. Thronson	Registration No. (Attorney/Agent)	33,082	
Signature			Date	May 10, 2001

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<b>FEE TRANSMITTAL for FY 2001</b>		<b>Complete if Known</b>																																																																																																																																																																																																																																						
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ADDITIONAL FEES</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Large Entity</th> <th style="text-align: left;">Small Entity</th> <th colspan="4" style="text-align: center;">Fee Description</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> <th colspan="2"></th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>105</td><td>130</td><td>205</td><td>65</td><td colspan="2">Surcharge – late filing fee or oath</td><td><span style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></span></td></tr> <tr><td>127</td><td>50</td><td>227</td><td>25</td><td colspan="2">Surcharge – late provisional filing fee or cover sheet.</td><td><span style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></span></td></tr> <tr><td>139</td><td>130</td><td>139</td><td>130</td><td colspan="2">Non-English specification</td><td><span style="border: 1px solid black; 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179	710	279	355	Request for Continued Examination (RCE)		<span style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></span>																																																																																																																																																																																																																																		
169	900	169	900	Request for expedited examination of a design application		<span style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></span>																																																																																																																																																																																																																																		
				Other fee (specify) _____																																																																																																																																																																																																																																				
				*Reduced by Basic Filing Fee Paid		SUBTOTAL (3) (\$)																																																																																																																																																																																																																																		
<p>** or number previously paid, if greater; For Reissues, see above</p>																																																																																																																																																																																																																																								
<b>SUBMITTED BY</b>						<b>Complete (if applicable)</b>																																																																																																																																																																																																																																		
Name (print/type)	Mark J. Thronson 		Registration No. (Attorney/Agent)	33,082		Telephone	(202) 775-4742																																																																																																																																																																																																																																	
Signature						Date	May 10, 2001																																																																																																																																																																																																																																	